

PRELIMINARY AND SHORT REPORTS

EVALUATION OF HISTADYL CREAM* †

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The various antihistaminic drugs have been used orally for relief of pruritus since their introduction several years ago. Results with oral use were not striking in most cases and unsatisfactory in many others. Friedleander and Feinberg (1) reported that the local application of Benadryl has some antihistaminic effect. Perry (2) investigated the use of 2% Benadryl in a base containing cetyl alcohol, carbowax, methyl p. hydroxyl benzoate. His conclusions were that local application of 2% Benadryl ointment is not followed by sufficient absorption (if any) to decrease the diameter of the erythema and the size of experimentally produced wheals of 22 patients with various pruritic dermatoses treated with 2% Benadryl ointment. Moderate relief of itching was obtained in six and excellent relief of itching in two. Of these eight cases however, four obtained the same antipruritic effect with the ointment base alone.

Sulzberger and associates (3) found 2% or 5% Pyribenzamine cream a good adjunct in treating lichen simplex chronicus but found its value questionable in the treatment of other dermatoses. Woolridge and Joseph (4) state that Thephorin used locally as an ointment

TABLE 1

	NUMBER OF CASES	IMPROVED WITH HISTADYL CREAM	IMPROVED CARBOWAX ALONE
Neurodermatitis Disseminated	28	10	2
Anal, Vulval or Scrotal Pruritus	24	14	4
Contact Dermatitis	19	2	1
Localized Neurodermatitis	12	4	3
Ecematoid Dermatitis	21	11	4

appears to be promising in the treatment of disseminated neurodermatitis. Histadyl, [N-(2-Pyridyl)-N-(2-Thenyl)-N¹N¹-Dimethyl Ethylenediamine Hydrochloride] was found by Lee, Dinwiddie and Chen (5) to be a potent antihistamine and Peirce and Mothersill (6) reported on its oral use in urticaria, rhinitis (hay fever), asthma, drug and serum reactions, and headaches. They stated that it had high antihistamine effectiveness and relatively low toxicity.

In view of the favorable results with local use of Benadryl, Pyribenzamine and Thephorin in the treatment of many pruritic dermatoses, it was decided to investigate the effect of 2% Histadyl hydrochloride in a carbowax base. At the Johns Hopkins Skin Clinic this compound was prescribed for a wide variety of pruritic dermatoses. Each patient was given 2% Histadyl cream to apply locally to the lesions on one half the area affected and on the other half the carbowax base alone was applied for control studies. In anal, vulval or scrotal pruritus the ointment was applied to the anus and the base to vulva or scrotum.

The series consisted of twenty eight cases of atopic dermatitis or disseminated neurodermatitis, nineteen cases of contact dermatitis, twenty four cases of anal and vulval or

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scrotal pruritus, twelve cases of localized neurodermatitis and twenty one cases of eczematoid dermatitis of unknown etiology. Some of this total of one hundred and four cases were of acute onset while others were of longer duration. A significant fact in all the cases was that no instance of contact dermatitis from either the Histadyl or the carbowax ever was observed. In those cases where improvement was noted, it consisted chiefly of relief of pruritus and in some cases diminution or even disappearance of the lesions. However, many cases showed no improvement of any kind with Histadyl cream.

Some of the cases of neurodermatitis and of anal, vulval or scrotal pruritus and of neurodermite obtained marked relief of pruritus with Histadyl cream where all other local and systemic remedies failed. However, only a very few of these cases actually had a disappearance of their skin lesions or permanent cessation of itching. There appeared to be some benefit from the carbowax base alone but not as much as from the Histadyl and carbowax base together. Thus, 40% of the pruritic dermatoses did get temporary relief from pruritus; but Histadyl did not give any permanent or lasting results.

SUMMARY

2% Histadyl hydrochloride in carbowax was prescribed for one hundred and four cases of dermatoses in which the cardinal symptom was pruritus unrelieved by any other type of medication. In 40% of these cases temporary relief of pruritus was observed as long as the ointment was used. A control of carbowax base alone was not effective as an anti-pruritic in most of these cases. Few permanent or lasting benefits were observed from the use of 2% Histadyl cream. No cases of contact dermatitis were observed.

REFERENCES

1. FRIEDLEANDER, G. AND FEINBERG, S. M.: III Histamine antagonists. The effect of oral and local use of betadimethylaminoethyl-benzhydryl ether hydrochloride in the whealing due to histamine, antigen-antibody reactions and other whealing mechanisms. Therapeutic results in allergic manifestations. *J. Allergy* 17: 129, March 1946.
2. PERRY, DANIEL J.: The local use of benadryl ointment. *J. Invest. Dermat.* 9: 2, 95, August 1947.
3. SULZBERGER, M. B., BAER, RUDOLPH, AND LEVIN, H. B.: Local therapy with pyribenzamine hydrochloride. *J. Invest. Dermat.* 10: 2, 41, February 1948.
4. WOOLRIDGE, W. E. AND JOSEPH, H. L.: Theophorin in the treatment of disseminated neurodermatitis. *J. Invest. Dermat.* 11: 2, 93, August 1948.
5. The antihistamine action of N(2-Pyridyl)-N-(2-Thenyl)-N¹N¹-dimethyl ethylenediamine hydrochloride. *J. Pharmacol. & Exper. Therap.* 89 #1, 83, May 1947.
6. PEIRCE, J. D., MOTHERSILL, M. H.: Treatment of allergic symptoms with new anti-histamine drugs. *J. Indiana M. A.* 40, 8, 739, August 1947.